Approved for use through 7/31/2006. OMB 0651-0032
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o a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Pocket Number		
CLAIMS AS FILED PART I (Calumn 1) (Column 2)						SMA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA			FEE		RATE	· FEE
	C FEE FR 1.16(a))		-	_				s	OR		s
	L CLAIMS FR 1.16(c))		minus 20	= •	·	x s	_ =		OR	x s=	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		15	minus 3 =			x s	=		OR	x s=	
MUL	TIPLE DEPENDE	NT CLAIM PRESEN	LAIM PRESENT (37 CFR 1.16(d))			+ s·	=		OR	+ s =	
* If the difference in column 1 is less than zero, enter *0* in column 2.						TOTA			OR	TOTAL	
CLAIMS AS AMENDED - PART II											
		(Column 1)		(Column 2)	(Column 3)	SMA	LL EN	VTITY	OR		R THAN ENTITY
NT A	5/23/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total (37 CFR 1.16(c))	18	Minus	20	=	.x s <u>25</u>	_		OR	x s <u>50</u> =	
빎	Independent (37 CFR 1.16(b))	رو	Minus	4	=	x s 100)_ [OR	x s <u>200</u>	
AM	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))	+ s_180)_		OR	+5360	
						TOTAL ADD'L F	EE [OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Calumn 3)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	••	=	x s 25	=		OR	x s <u>50</u> =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	x s_IO)=		OR	x s 200=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)))_		OR	+ 360	
						TOTAL ADD'L F	EE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	••	=	x s 25	[_		OR	x s 50 =	
	Independent (37 CFR 1.16(b))	•	Minus		=	x s_10	2		OR	x s 200	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ s \ 8	<u>)</u> [OR	, 360	
									OR	TOTAL ADD'L FEE	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: CommIssioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.